

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W.C.		6-12-05
O.I.P.E. CLASSIFIER	M.D.	5A	6-9-05
FORMALITY REVIEW	C.T.	60125	5/3/05
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

Claim	Final	Original	Date
1	1	1	2/26/05
2	2	2	2/26/05
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If more than 150 claims or 10 actions
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